PUBLIC ACCESS FOR COMPRESSED NATURAL GAS FUEL SITES
FUEL NETWORK USERS AGREEMENT

1.   PARTIES TO THE AGREEMENT: Between the State of Utah, Department of Administrative Services, Division of Fleet Operations referred to as STATE and the following USER:

   USER Name: _____   Phone Number: _____

   USER Billing Address _____

   _____Email_____

   SSN# _____Driver License # _____Exp_____

2.   PURPOSE OF AGREEMENT: The purpose of this agreement is to provide electronic fuel dispensing and fleet card processing services to the USER at State Consolidated Compressed Natural Gas Network sites.

3.   PERIOD OF AGREEMENT: Effective _____ and will continue until canceled by either party by giving the other party 15 days prior written notice. On termination of this agreement all payments will be processed for purchases made by USER through the date of termination.

4.   PAYMENT PROCEDURES: USER will be billed monthly directly from FleetCor. The monthly billing and "Fuel Management Report" are the same document. USER agrees to pay the billing within 21 days of billing closing date. Nonpayment can cause the access cards to become "disabled" until payment is received.

5.   USER ACCESS CARDS: Access cards for fuel purchases will be issued to USER for agency staff use.

6.   COSTS TO BE BILLED USER: Fuel at "state" locations will be at "rack plus delivery and administrative fee. This fee is established through public rate hearings and is based on the costs of managing the Network. The costs and rates are Public Information and will be made public.

7.   OPERATING PROCEDURES: USER will use the NETWORK facilities in a responsible and safe manner and shall indemnify the STATE for damages caused by USER'S at a State Consolidated Network Site.

8.   User agrees to give government vehicles priority fueling and will honor the preferred fueling hours at the University of Utah compressed natural gas fuel site. The preferred hours are: Monday – Friday 9AM – 1PM and after 8PM. All day Saturday and Sunday. No fueling during athletic and special events at the Jon Huntsman Special Events Center and Rice Eccles Stadium.

IN WITNESS WHEREOF, the parties sign and cause this agreement to be executed between the

USER and the STATE on this date _____ .

USER   □   Mail card
_____
Authorized Representative
                                                  □   Pickup card
_____
Type Name and Title of Authorized